PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

04/686516

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE (OTHER THAN SMALL ENTITY	
TOTAL CLAIMS							Γ	RATE	FEE	1	RATE	FEE
FOR			NUMBER	FILED	NUMB	ER EXTRA	В	ASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			@ minus 20= *		*	->		X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			9 minus 3 = *		*			X40=		OR	X80=	
ΜL	ILTIPLE DEPEN	IDENT CLAIM P	RESENT					+135=		OR	+270=	
* If	the difference	in column 1 is	less than ze	ro, ente	r "0" in c	olumn 2	L	TOTAL	25	OR	TOTAL	
CLAIMS AS AMENDED - PART II										1011	OTHER	THAN
(Column 1) (Column 2) (Column 2) (Column 2)						(Column 3)	_ 5	SMALL E		OR	SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 74	Minus	** 20	<u> </u>	= 54		X\$ 9=	486.00	OR	X\$18=	
	Independent	NTATION OF MI	Minus	*** <u>3</u>	T CLAIM	[= 7		X40=	280.00	OR	X80=	
	THOTTHEOL	NIAHON OF WI		LINDLIN	OLAIM		4	+135=		OR	+270=	
							Δn	TOTAL DIT. FEE	766-00	OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)								f	ee pa	•		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	:	X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MU	Minus	***	F OL ALIA	=		X40=		OR	X80=	
<u> </u>	FINST PRESE	NTATION OF IME	DETIPLE DEF	ENDEN	CLAIM		-	-135 =		OR	+270=	
							ADI	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colur		(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	·· ·	=	>	X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MI	Minus	***	CL AINA	<u> </u>	,	X40=		OR :	X80=	
	I INST PRESE	INTATION OF MU	JEHPLE DEF	CINDEIN	CLAIM			-135=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											TOTAL	
If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." *If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												